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Fill in this information to identify your ca	se:	
United States Bankruptcy Court for the: Eastern District of Texas		
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this is a amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Maite	
	Write the name that is on your	First name	First name
	government-issued picture identification (for example, your	Stella	
	driver's license or passport).	Middle name	Middle name
	Bring your picture identification	Casaldeiro Last name	Last name
	to your meeting with the trustee.	240.14110	Last Harrie
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)
2.	All other names you have used in the last 8 years	First name	First name
	Include your married or maiden names and any assumed, trade names and <i>doing business as</i>	Middle name	Middle name
	names.	Last name	Last name
	Do NOT list the name of any		
	separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.	First name	First name
	that is not filling this petition.	Middle name	Middle name
		Last name	Last name
		Business name (if applicable)	Business name (if applicable)
		Business name (if applicable)	Business name (if applicable)
3.	Only the last 4 digits of your Social Security number or	xxx - xx - <u>9</u> <u>1</u> <u>0</u> <u>0</u>	xxx - xx
	federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx

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Debtor 1 Maite First Name	Stella Casaldeiro Middle Name Last Name	Case number (if known)		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Your Employer Identification Number (EIN), if any.	EIN	EIN		
	EIN	EIN		
5. Where you live		If Debtor 2 lives at a different address:		
	15624 Gatehouse Dr			
	Number Street	Number Street		
	Roanoke, TX 76262-6378 City State ZIP Code	City State ZIP Code		
	Ponton			
	<u>Denton</u> County	County		
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.		
	Number Street	Number Street		
	P.O. Box	P.O. Box		
	City State ZIP Code	City State ZIP Code		
6. Why you are choosing <i>this</i>	Check one:	Check one:		
district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filling this petition, I have lived in this district longer than in any other district.		
	☐ I have another reason. Explain. (See 28 U.S.C. § 1408)	I have another reason. Explain. (See 28 U.S.C. § 1408)		

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Casaldeiro

Deb	tor 1 Maite	Stella	Casaldeiro	Case number (if known)
	First Name	Middle Name	Last Name	
Par	t 2: Tell the Court About Yo	ur Bankruptcy	Case	
ı aı	t 2. Ton the ocur / tout to	ar Barna aproy		
7.	The chapter of the Bankruptcy Code you are choosing to file under		m 2010)). Also, go to the t	n, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for op of page 1 and check the appropriate box.
8.	How you will pay the fee	details abou check, or mo a credit card	t how you may pay. Typica oney order. If your attorne I or check with a pre-printe	petition. Please check with the clerk's office in your local court for more ally, if you are paying the fee yourself, you may pay with cash, cashier's y is submitting your payment on your behalf, your attorney may pay with ed address. If you choose this option, sign and attach the <i>Application for Individuals</i>
			Filing Fee in Installments (
		judge may, b official pover choose this	out is not required to, waiv rty line that applies to you	may request this option only if you are filing for Chapter 7. By law, a e your fee, and may do so only if your income is less than 150% of the family size and you are unable to pay the fee in installments). If you e Application to Have the Chapter 7 Filing Fee Waived (Official Form
9.	Have you filed for bankruptcy	☑ No.		
	within the last 8 years?	□v		
		Yes. District		When Case number
				MM / DD / YYYY
		District		WhenCase number
		2.0		MM / DD / YYYY
		District		When Case number
				MM / DD / YYYY
10.	Are any bankruptcy cases	✓ No.		
	pending or being filed by a	Dyes Dalum		Deletional in terror
	spouse who is not filing this case with you, or by a	— res. Deptor		Relationship to you
	business partner, or by an	District	-	When Case number, if known
	affiliate?			MM / DD / YYYY
		Dahtan		Deletionalia to vev
		Debioi		Relationship to you
		District		
				MM / DD / YYYY
11	Do you rent your residence?	☑ No. Go to	line 12.	
	, , - u			
			our landlord obtained an e	viction judgment against you?
		☐ No	o. Go to line 12.	
			es. Fill out <i>Initial Statemen</i> s part of this bankruptcy pe	t About an Eviction Judgment Against You (Form 101A) and file it
		as	part of this parikruptcy pe	AUOH.

Debtor 1

Maite

Stella

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Debtor 1 Maite First Name		Stella	Stella Casaldeiro		Case number (if known)			
		Middle Nam	Middle Name Last Name					
Par	rt 3: Report About Any Bu	sinesses Yo	u Own as a Sole Proprieto	or				
12.	Are you a sole proprietor of any full- or part-time	_	o to Part 4.					
	business?	Tes. I	Tame and location of business					
	A sole proprietorship is a business you operate as an individual, and is not a separat legal entity such as a		of business, if any					
	corporation, partnership, or LL	C. Numbe	er Street					
	If you have more than one sole proprietorship, use a separate sheet and attach it to this							
	petition.	City		State	ZIP Code			
		Check	k the appropriate box to describ					
		□н	☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))					
		□s	☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))					
		□ s	☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))					
		☐ c	☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))					
		□ _N	☐ None of the above					
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S. C. § 1182(1)?	proceed u debtor or y of operation	<i>inder Subchapter V</i> so that it ca you are choosing to proceed un	<i>in set appropriate deadlii</i> ider Subchapter V, you n	ou are a small business debtor or a debtor choosing to nes. If you indicate that you are a small business nust attach your most recent balance sheet, statement or if any of these documents do not exist, follow the			
	For a definition of small busine	ss 🗹 No.	I am not filing under Chapter	11.				
	debtor, see 11 U.S.C. § 101(51D).	☐ No.	I am filing under Chapter 11, Bankruptcy Code.	but I am NOT a small be	usiness debtor according to the definition in the			
		☐ Yes.			lebtor according to the definition in the nder Subchapter V of Chapter 11.			
		☐ Yes.	I am filing under Chapter 11, Code, and I choose to proce		to the definition in § 1182(1) of the Bankruptcy			

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Debt	or 1	Maite	Stella	Casaldeiro		_ Case number (if known) —			
		First Name	Middle Name	Last Name		,	,			
Part	4: Report	if You Own or Ha	ave Any Haz	zardous Property or	Any Property	hat Needs Immediate A	ttention			
14.	Do you own	or have any	☑ No.							
	property that pos alleged to pose a		☐ Yes. V	What is the hazard?						
		inent and identifiable ard to public health or	nminent and identifiable							
	safety? Or do you own any									
	attention?	roperty that needs immediate ttention?	lf	f immediate attention is r	needed, why is it r	eeded?				
	For example, do you own perishable goods, or livestock									
	that must be	fed, or a building rgent repairs?								
		9 -	V	Where is the property?						
				, , ,	Number Str	eet				
					City		State	ZIP Code		

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Debtor 1 Maite Stella Casaldeiro Case number (if known). First Name Middle Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling 15. Tell the court whether you About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): have received a briefing about credit counseling. The law requires that you You must check one: You must check one: receive a briefing about credit I received a briefing from an approved credit counseling I received a briefing from an approved credit counseling counseling before you file for agency within the 180 days before I filed this bankruptcy agency within the 180 days before I filed this bankruptcy bankruptcy. You must truthfully petition, and I received a certificate of completion. petition, and I received a certificate of completion. check one of the following choices. If you cannot do so, Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, you are not eligible to file. that you developed with the agency. that you developed with the agency. I received a briefing from an approved credit counseling I received a briefing from an approved credit counseling If you file anyway, the court agency within the 180 days before I filed this bankruptcy agency within the 180 days before I filed this bankruptcy can dismiss your case, you will petition, but I do not have a certificate of completion. petition, but I do not have a certificate of completion. lose whatever filing fee you paid, and your creditors can Within 14 days after you file this bankruptcy petition, you Within 14 days after you file this bankruptcy petition, you begin collection activities MUST file a copy of the certificate and payment plan, if any. MUST file a copy of the certificate and payment plan, if any. again. I certify that I asked for credit counseling services from an I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the circumstances merit a 30-day temporary waiver of the requirement. requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances required you to file this case. required you to file this case. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. about finances. Disability. Disability. My physical disability causes me to be My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried to internet, even after I reasonably tried to Active duty. I am currently on active military duty in Active duty. I am currently on active military duty in a military combat zone. a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of about credit counseling, you must file a motion for waiver of credit counseling with the court. credit counseling with the court.

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Casaldeiro

Debt	or 1	Maite	Stella	Casaldeiro		Case n	umber	(if known)
		First Name	Middle N	lame Last Name				
Part	t 6: Answer	These Questions	s for R	eporting Purposes				
16. What kind of debts do you have?		16a.		-				
			16b.			s debts? Business debts are debt rough the operation of the busines		
			16c.	State the type of debts you ow	/e th	at are not consumer debts or busi	ness d	lebts.
17.	Are you filin	g under Chapter 7?		No. I am not filing under Cha				
	exempt prop and adminis paid that fun	nate that after any erty is excluded trative expenses are ds will be available on to unsecured	5 1	Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured credit ✓ No ✓ Yes				
18.	How many c estimate tha	reditors do you t you owe?		1-49				000
19.	How much d	o you estimate you worth?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.	liabilities to		, S	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
For	you	If I have States C If no atto have obt I request I underst bankrupt and 357	chosen ode. I u rney repained an relief ir and ma cy case I.	to file under Chapter 7, I am aw inderstand the relief available ur presents me and I did not pay o and read the notice required by 1 accordance with the chapter o king a false statement, conceal	vare nder or ago 11 U. of title ing p	each chapter, and I choose to progree to pay someone who is not an .S.C. § 342(b). e 11, United States Code, specified property, or obtaining money or progress.	der Cha oceed u attorn d in thi	apter 7, 11,12, or 13 of title 11, United under Chapter 7. ey to help me fill out this document, I s petition.
			aite Stel	la Casaldeiro, Debtor 1				

Debtor 1

Maite

Stella

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Debtor 1	Maite	Stella	Casaldeiro	Case number (if known)
	First Name	Middle Name	Last Name	
represente	ted by one proceed under Chapter 7, 1 each chapter for which the 11 U.S.C. § 342(b) and, in a		Chapter 7, 11, 12, or 13 of or which the person is eligibate 2(b) and, in a case in which	his petition, declare that I have informed the debtor(s) about eligibility to title 11, United States Code, and have explained the relief available under ble. I also certify that I have delivered to the debtor(s) the notice required by a \$ 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry with the petition is incorrect.
		X /s/Thom	as Allen Ford	Date 01/12/2023
		Signature	of Attorney for Debtor	MM / DD / YYYY
		Printed na Thomas / Firm name 99 Troph Number	A Ford, AAL PLLC	
		Trophy C	lub	TX 76262-5422
		City Contact ph	none <u>(817) 541-6310</u>	State ZIP Code Email address thomas@attorneyford.com
		24032068	.	тх
		Bar numbe		State

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Fill in this information	to identify your case	and this filing:		
Debtor 1	_Maite	Stella	Casaldeiro	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:			Eastern District of Texas	 ☐ Check if this is an
Case number				amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

 Do you own or have any legal or equitable inter No. Go to Part 2. ✓ Yes. Where is the property? 	est in any residence, building, land, or similar pro	perty?	
1.1 Single Family Home Street address, if available, or other description 15624 Gatehouse Dr Roanoke, TX 76262-6378 City State ZIP Code Denton County	What is the property? Check all that apply. ✓ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$264,272.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee Simple	
	☐ Other Other Check one.		
	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Check if this is comment (see instructions)	nunity property
	Other information you wish to add about this item property identification number: Purchased with	•	r homestead.
	Source of Value: Denton CAD 2022		

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Debt	or 1	Maite First Name	Stella Middle Name	Casaldeiro Last Name	Case number (if kno	own)
Part	t 2: Desc	cribe Your Vel	nicles			
					registered or not? Include any vehicle secutory Contracts and Unexpired Leas	
[Cars, vans ☐ No ☑ Yes	, trucks, tractors	s, sport utility vehicle	s, motorcycles		
3	3.1 Make:			Who has an interest in the property	Do not accast cocarea	claims or exemptions. Put the claims on Schedule D: Creditors
	Model:		Odyssey	☑ Debtor 1 only ☐ Debtor 2 only	Who Have Claims Sec	
	Year:		2015	Debtor 1 and Debtor 2 onlyAt least one of the debtors and ar	Current value of the entire property?	Current value of the portion you own?
		vimate mileage:	75000	☐ Check if this is community prope	\$21,925.0	90 \$21,925.00
	Culci i	mornadon.		(see instructions)	,	
5.	No Yes Add the de	ollar value of the	e portion you own fo	ercraft, fishing vessels, snowmobiles, r all of your entries from Part 2, inclu r here	uding any entries for pages	→ \$21,925.00
Part	t 3: Desc	cribe Your Per	sonal and House	nold Items		
Do	you own o	or have any legal	or equitable interest	in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6. I	Household	goods and furn	ishings			
	Examples: ☐ No	Major appliance	es, furniture, linens, cl	nina, kitchenware		
	7	escribe	normal household g	oods and furnishings for a 1 person h	nousehold	\$3,500.00
7. E	Electronics	S				
E	Examples:			stereo, and digital equipment; compung cell phones, cameras, media play	* •	
[No Yes. De	escribe	normal household e	ectronics for a 1-person household		\$1,250.00
8. (Collectible	s of value				
		Antiques and fig		nts, or other artwork; books, pictures, ons; other collections, memorabilia, o	•	
[☑ No ☐ Yes. De	escribe		,		

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Deb	tor 1	Maite	Stella	Casaldeiro	Case number (if known) _	
		First Name	Middle Name	Last Name		
9.	Equipment	for sports and h	obbies			
	Examples:		aphic, exercise, and other ry tools; musical instrume		ool tables, golf clubs, skis; canoes and	
	☑ No		,,,			
	☐ Yes. De	scribe				
10.	Firearms					
	Examples ✓ No	: Pistols, rifles, s	shotguns, ammunition, an	d related equipment		
		escribe				
11.	Clothes					
		: Everyday cloth	es, furs, leather coats, de	signer wear, shoes, accessori	es	
	☐ No ✓ Yes. D	escribe	clothes for 1 adult			\$750.00
10	Jewelry					
12.	•		Iry, costume jewelry, enga	gement rings, wedding rings,	heirloom jewelry, watches, gems, gold,	
	☐ No	silver	miscellaneous jewelry, ne	o item valued over \$500		\$1,500.00
	Yes. D	escribe	Thiscellaneous jeweny, in	Titem valued over \$500		\$1,500.00
13.	Non-farm	animals				
	Examples ✓ No	Dogs, cats, bir	ds, horses			
		escribe				
14	Any other	nersonal and he	nusehold items vou did n	ot already list, including any	health aids you did not list	
14.	✓ No	personal and in	Justinia items you did it	ot alleady list, moldaling any	nealth alds you did not list	
		escribe				
15.	Add the d	ollar value of all	of your entries from Part	3, including any entries for p	pages you have attached	
	for Part 3.	Write that numb	er here		→	\$7,000.00
Der	+ 4. Dags	nile a Marie Fier	oneigl Accepts			
		cribe Your Fina		on of the fellowing		Owner to the
ЪО	you own o	r nave any legal	or equitable interest in a	ny of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash					
	✓ No	: Money you ha	ve in your wallet, in your h	ome, in a sate deposit box, ar	nd on hand when you file your petition	
	Yes				Cash	

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Debtor 1	Maite First Name	Stella Middle Name	Casaldeiro Last Name	Case number (if known)
Examp			ccounts; certificates of deposit; sh we multiple accounts with the sam	nares in credit unions, brokerage houses, e institution, list each.
		Institution name:		
17.1. C	Other financial account:	Merrill Cash Ma	anagement Account	\$2,056.00
17.2. C	hecking account:	Bank of Americ	a 0709	\$933.96
8. Bonds	, mutual funds, or public	cly traded stocks		
☑ No ☐ Yes	eles: Bond funds, investi	ment accounts with	brokerage firms, money market a	ccounts
an LLC ✓ No ☐ Yes info	ublicly traded stock and controls, partnership, and joint controls. Give specific formation about		orated and unincorporated busir	nesses, including an interest in
Name o	of entity:		% of owner	ership:
Negotia Non-ne ✓ No ☐ Yes info	able instruments include egotiable instruments are s. Give specific ermation about	personal checks, ca	otiable and non-negotiable instruashiers' checks, promissory notes, ransfer to someone by signing or	and money orders.
Examp ☐ No ☑ Yes	nent or pension accountules: Interests in IRA, Efforts. List each count separately.), 403(b), thrift savings accounts,	or other pension or profit-sharing plans
Type of	f account: Institu	ition name:		
IRA:	<u>Merr</u>	ill IRA		\$43,772.00
Your sh Examp or othe ☑ No	les: Agreements with lar	its you have made s	so that you may continue service of t, public utilities (electric, gas, wat	or use from a company er), telecommunications companies,

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Debtor 1 Maite Stella Casaldeiro Case number (if known) _ First Name Middle Name Last Name Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: -Prepaid rent: Telephone: Water: Rented furniture: Other: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) **☑** No ☐ Yes..... Issuer name and description: 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). **✓** No ☐ Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c): Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit **☑** No ☐ Yes. Give specific information about them.... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements **√** No ☐ Yes. Give specific information about them....

Official Form 106A/B Schedule A/B: Property page 5

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Debt	or 1	Maite	Stella	Casaldeiro	Case number (if known)	
		First Name	Middle Nam	e Last Name		
27.		ranchises, and other	_	ngibles es, cooperative association holdings,	liquor licenses	
		professional license		es, cooperative association holdings,	ilquoi ilcerises,	
	✓ No ☐ Yes. Giv	e specific				
	informat	ion about them				
Mone	ey or proper	ty owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds	owed to you				
	☑ No		_			
	Yes. Given	ve specific informati m, including wheth	on about er you		Federal:	
	alre	eady filed the return	is and		State:	
		tun you.o			Local:	
29.	☑ No ☐ Yes. Giv	Past due or lump s	on	pousal support, child support, mainter	Alimony: Maintenance: Support: Divorce settlement: Property settlement:	
30.		Ints someone owes Unpaid wages, disa	-	ce payments, disability benefits, sick r	pay, vacation pay, workers' compensation,	
		Social Security ber	nefits; unpaid l	pans you made to someone else	say, vacation pay, womore compensation,	
	✓ No ☐ Yes. Giv	ve specific informati	on			
						
31.		insurance policies Health, disability, o		r; health savings account (HSA); credi	t, homeowner's, or renter's insurance	
	☐ Yes. Na	me the insurance categories and list	ompany its value	Company name:	Beneficiary:	Surrender or refund value:

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Debtor 1 Casaldeiro Maite Stella Case number (if known) -Middle Name First Name Last Name 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ☐ Yes. Give specific information........ 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue **√** No ☐ Yes. Describe each claim..... Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims **☑** No ☐ Yes. Describe each claim..... 35. Any financial assets you did not already list **√** No ☐ Yes. Give specific information....... Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here..... \$46,761.96 Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? ✓ No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned **√** No ☐ Yes. Describe...... 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices ☐ Yes. Describe......

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Debt	or 1	Maite	Stella	Casaldeiro	Case number (if known) _	
		First Name	Middle Name	Last Name		
40.	Machinery, f	ixtures, equipr	ment, supplies you use ir	business, and tools of yo	our trade	
	□6					
	✓ No					
	Yes. Des	cribe				
41.	Inventory					
	-					
	☑ No					
	Yes. Des	cribe				
42.	Interests in r	nartnershins o	r joint ventures			
42.		partifici strips o	i joint ventures			
	☑ No					
	Yes. Des	cribe				
	Name of enti	itv-		% of	ownership:	
	rvanic or criti	ity.		70 01	ownership.	
					%	
43.	Customer lis	sts, mailing list	s, or other compilations			
	√ No					
	Yes. Do y	our lists inclu	de personally identifiable	information (as defined in	n 11 U.S.C. § 101(41A))?	
		No		,		
		Yes. Describe				
	_	res. Describe				
	A 1		antanana di danatahan dari	U-4		
44.	Any busines	ss-related prop	erty you did not already	ist		
	√ No					
	Yes. Give	specific				
	information					
45.				5, including any entries fo	or pages you have attached	
	for Part 5. W	rite that numb	er here			\$0.00
Part		-			You Own or Have an Interest In.	
	If you o	wn or have an	interest in farmland, list	t in Part 1.		
46.	Do you own	or have any le	gal or equitable interest	n any farm- or commercia	al fishing-related property?	
	☑ No. Go to	Part 7.				
	Yes. Go to	o line 47.				
						Current value of the
						portion you own? Do not deduct secured
						claims or exemptions.
	F	1-				
47.	Farm animal					
		Livestock, poul	try, farm-raised fish			
	√ No	[
	☐ Yes					
		ı				

Schedule A/B: Property page 8 Case 23-40077 Doc 1 Filed 01/12/23 Entered 01/12/23 19:04:58 Desc Main Document Page 17 of 64

Debt	or 1	Maite	Stella	Casaldeiro	Case number (if known).	
		First Name	Middle Name	Last Name		
48.		er growing or	harvested			
	✓ No	Г			1	
	Yes. Give	specific				
		[
49.	Farm and fis	hing equipme	nt, implements, machinery,	fixtures, and tools of trac	le	
	√ No					
	Yes					
		L				
50.	Farm and fis	hing supplies.	chemicals, and feed			
	√ No	9	,			
	Yes	[
	_ 100					
51.	-	id commercial	fishing-related property yo	u did not already list		
	☑ No	Г				
	Yes. Give	specific				
		L				
52.	Add the dolla	ar value of all	of your entries from Part 6,	including any entries for	pages you have attached	
02.					→	\$0.00
Dar	t 7: Describ	he All Prone	rty You Own or Have a	n Interest in That Vo	LDid Not List Above	
ı aı	C7. Desern	56 7 tti 1 1 0 p c	rty rou own or riave a	Trinterest in That To	- Did Not List / Bove	
53.	Do you have	other propert	y of any kind you did not al	ready list?		
	Examples: S	Season tickets	country club membership			
	☑ No	[
	Yes. Give	specific on				
	mormane	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
54.	Add the dolla	ar value of all	of your entries from Part 7.	Write that number here	 →	\$0.00
Dor	t Q. Lict the	o Totals of F	ach Part of this Form			
Par	LIST THE	e Totals of E	acii Part Or tilis FOITI			
55.	Part 1: Total	real estate, lin	e 2		 →	\$264,272.00
56.	Part 2: Total	vehicles, line	5	\$21,92	25.00	
57.	Part 3: Total	personal and	nousehold items, line 15	\$7,00	0.00	
E0	Don't 4: T-1:1	financial	o line 26	A40 =	24.06	
58.	rart 4: IOtal	financial asse	s, iiile 36	\$46,70	<u>,1.90</u>	
59.	Part 5: Total	business-relat	ed property, line 45	<u> </u>	60.00	
						
60.	Part 6: Total	farm- and fish	ng-related property, line 52	<u> </u>	50.00	

Official Form 106A/B Schedule A/B: Property page 9

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Debtor 1	Maite	Stella	Casaldeiro		Case number (if kno	Case number (if known)		
	First Name	Middle Name	Last Name		· ,	,		
61. Part 7: To	tal other property	not listed, line 54	+	\$0.00				
62. Total per	sonal property. Add	d lines 56 through 61		\$75,686.96	Copy personal property total→	+ \$75,686.96		
63. Total of a	ll property on Sche	edule A/B. Add line 55 +	· line 62			\$339,958.96		

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Fill in this information	n to identify your ca	se:		
Debtor 1	_ Maite	Stella	Casaldeiro	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the	:	Eastern District of Texas	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as	Exempt						
 Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below. 							
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption				
Brief description: Single Family Home 15624 Gatehouse Dr Roanoke, TX 76262-6378 Line from Schedule A/B: 1.1	\$264,272.00	\$264,272.00 100% of fair market value, up to any applicable statutory limit	Const. art. 16 §§ 50, 51, Texas Prop. Code §§ 41.001002				
Brief description: 2015 Honda Odyssey Line from Schedule A/B: 3.1	\$21,925.00	\$21,925.00 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(9)				
3. Are you claiming a homestead exemption of m (Subject to adjustment on 4/01/25 and every 3 to line) ☐ No ☐ Yes. Did you acquire the property covered be line ☐ No ☐ Yes	years after that for cases f	,					

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Debtor 1 Maite Stella Casaldeiro Case number (if known) _ First Name Middle Name Last Name Part 2: Additional Page Brief description of the property and line on Amount of the exemption you claim Specific laws that allow exemption Current value of the Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Brief description: $\sqrt{}$ Tex. Prop. Code §§ 42.001(a), \$3,500.00 \$3,500.00 normal household goods and furnishings for a 1 42.002(a)(1) 100% of fair market value, up person household to any applicable statutory limit Line from Schedule A/B: Brief description: $\mathbf{\Lambda}$ \$1,250.00 Tex. Prop. Code §§ 42.001(a), \$1,250.00 normal household electronics for a 1-person 42.002(a)(1) 100% of fair market value, up household to any applicable statutory limit Line from Schedule A/B: Brief description: Tex. Prop. Code §§ 42.001(a), \$750.00 \$750.00 clothes for 1 adult 42.002(a)(5) 100% of fair market value, up I ine from to any applicable statutory limit Schedule A/B: Brief description: $\mathbf{\Lambda}$ Tex. Prop. Code §§ 42.001(a), \$1,500.00 \$1,500.00 miscellaneous jewelry, no item valued over \$500 42.002(a)(6) 100% of fair market value, up Line from to any applicable statutory limit Schedule A/B: 12 Brief description: $\sqrt{}$ 42 U.S.C. § 407 \$933.96 Bank of America 0709 100% of fair market value, up Checking account to any applicable statutory limit Line from 17 Schedule A/B:

Brief description:

21

Merrill IRA

Line from Schedule A/B: $\sqrt{}$

\$43,772.00

\$43,772.00

100% of fair market value, up to any applicable statutory limit

Tex. Prop. Code § 42.0021

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			Document	Page 21 of 64	,		
Fill in this information	to identify your case:						
Debtor 1	Maite First Name	Stella Middle Name	Casaldeiro Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankru	uptcy Court for the:		Eastern District o	f Texas			
Case number (if known)							if this is an ed filing
Official Form Schedule D		s Who L	Javo Clair	me Socuro	d by Propo	ortv	4045
Be as complete and ac					· ·		12/15
Yes. Fill in all of t	n). ve claims secured b	y your property?	?	dules. You have nothin			,
	claims. If a creditor hat ch claim. If more than chaim. As much as possib	one creditor has	s a particular claim,	, list the other	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1		Describe	the property that s	ecures the claim:			
Creditor's Name							
Number Stre	eet	As of the o	date you file, the clai	im is: Check all that			
City	State ZIP Code	Contin	gent				
Who owes the de	ebt? Check one.	Unliqui	idated				
Debtor 2 only		Disput	ed				
Debtor 1 and I	Debtor 2 only		lien. Check all that				
At least one of another	f the debtors and		reement you made (ured car loan)	(such as mortgage			
Check if this c		lien)	ory lien (such as tax				
Date debt was in	curred	_	ent lien from a laws				

Last 4 digits of account number _____

Add the dollar value of your entries in Column A on this page. Write that number here:

\$0.00

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Debtor 1 Maite Stella		Stella	Casaldeiro	<u> </u>	Case number (if known)			
	First Name	Middle Name	Last Name					
Part 1:	Additional Page After listing any e 2.3, followed by 2		age, number them beginning v	vith Do	nount of claim o not deduct the lue of llateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
2.2		Des	cribe the property that secures the c	laim:			_	
Creditor's	Name							
Number	Street		f the date you file, the claim is: Check a					
City	City State ZIP Code		- apply.					
,	es the debt? Check or	10	ontingent					
Debto		□ t	Inliquidated					
Debto	r 2 only		☐ Disputed					
Debto	r 1 and Debtor 2 only	Natu	Nature of lien. Check all that apply.					
At lea	st one of the debtors a		n agreement you made (such as mor r secured car loan)	rtgage				
	Check if this claim relates to a community debt Date debt was incurred		tatutory lien (such as tax lien, mecha en)	nic's				
			udgment lien from a lawsuit					
			Other (including a right to offset)					
		Last	4 digits of account number					
Add the	dollar value of your	entries in Column	A on this page. Write that number he	ere:		0.00		
If this is here:	the last page of your	form, add the dol	ar value totals from all pages. Write	that number	9	60.00		

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Debtor 1	Maite	Stella	Casaldeiro		
	First Name	Middle Name	Last Name		
Debtor 2				_	
(Spouse, if filing)	First Name	Middle Name	Last Name	_	
United States Bank	kruptcy Court for the:		Eastern District of Texas	_	
Case number (if known)					☐ Check amend

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property.* If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Cla	aims			
 Do any creditors have priority unsecured claims agai No. Go to Part 2. Yes. 	inst you?			
amounts. As much as possible, list the claims in alphab	as both priority and nonpriority amounts, list that claim hoetical order according to the creditor's name. If you have e creditor holds a particular claim, list the other creditors	ere and she more thar	ow both priori	ty and nonpriority
		Total claim	Priority amount	Nonpriority amount
Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of PRIORITY unsecured claim: □ Domestic support obligations □ Taxes and certain other debts you owe the government □ Claims for death or person injury while you were intoxicated □ Other. Specify			

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Debto	or 1	Maite	Stella	Casaldeiro	Case number (if	known)
		First Name	Middle Name	Last Name		
Part	2: List A	II of Your NONPR	IORITY Unsecu	ired Claims		
		0. 100. 110.11 11				
	-	litors have nonpriori	-			
	☐ No. You	have nothing to repo	rt in this part. Sub	mit this form to the court with you	r other schedules.	
5	√ Yes.					
4. L	ist all of yo	our nonpriority unsec	cured claims in th	e alphabetical order of the cred	tor who holds each claim. If a credit	or has more than one nonpriority
1	I. If more th				entify what type of claim it is. Do not I If you have more than three nonprior	
						Total claim
4.1	Covoley F	Portfolio Corvince		Last 4 digits of	occupt number 5751	\$6,801.00
···-		Portfolio Services Creditor's Name			account number <u>5751</u>	
		nkruptcy Attn: Bankı	ruptcy		ebt incurred? <u>01/01/2021</u>	anh
		mit Lake Drive , Suit		As of the date y	ou file, the claim is: Check all that ap	оріу.
	Number	Street		□ Unliquidated	1	
	Vahalla, I		. 715.0	Disputed		
	City		ate ZIP Code	· ·	OBITY unaccured eleim.	
	Who incur Debto	rred the debt? Check	one.	Student loa	ORITY unsecured claim:	
		r 2 only			arising out of a separation agreemen	t or
		r 1 and Debtor 2 only			you did not report as priority claims	COI
	_	st one of the debtors			nsion or profit-sharing plans, and other	er
		c if this claim is for a		similar debt		
		m subject to offset?	community debt	Other. Spec		
	✓ No	in subject to onset:				
	Yes					
40						\$9,724.00
4.2		ard Services Creditor's Name			account number 0706	Ψ3,124.00
	Attn: Ban				ebt incurred? <u>10/01/2015</u>	
	P.O. 1529				ou file, the claim is: Check all that ap	oply.
	Number	Street		Contingent		
		on, DE 19850		Unliquidated Disputed		
	City		ate ZIP Code		ODITY	
		rred the debt? Check	one.	Type of NONPR Student loa	ORITY unsecured claim:	
	_	r 1 only			arising out of a separation agreemen	tor
	_	r 2 only		divorce that	you did not report as priority claims	t OI
		r 1 and Debtor 2 only st one of the debtors			nsion or profit-sharing plans, and other	er
		c if this claim is for a		similar debt		
	Oncor	m subject to offset?	community debt	Other. Spec	ty	
	✓ No	in subject to onset:		0.000		
	☐ Yes					
40]						\$3,663.00
4.3	<u>Citibank</u>	Creditor's Name			account number 8851	
	Attn: Ban				ebt incurred? <u>02/01/2018</u>	
	P.O. Box				ou file, the claim is: Check all that ap	oply.
	Number	Street		Contingent		
	St Louis,	MO 63179		Unliquidated		
	City	St	ate ZIP Code			
		rred the debt? Check	one.	<u>~</u> :	ORITY unsecured claim:	
	☑ Debto	•		Student loa		.
	_	r 2 only		Obligations	arising out of a separation agreemen you did not report as priority claims	t Of
	_	r 1 and Debtor 2 only			nsion or profit-sharing plans, and other	er
		st one of the debtors		similar debt		
		t if this claim is for a	community debt	Other. Spec	fy	
	Is the clair	m subject to offset?		CreditCard		

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Case number (if known) _

Casaldeiro

Stella

Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim \$10,438.00 **Discover Financial** Last 4 digits of account number 0192 Nonpriority Creditor's Name When was the debt incurred? 09/01/2014 Attn: Bankruptcy As of the date you file, the claim is: Check all that apply. PO Box 3025 Contingent Number Street Unliquidated New Albany, OH 43054 ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only ■ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other ■ At least one of the debtors and another similar debts Check if this claim is for a community debt $\sqrt{}$ Other. Specify CreditCard Is the claim subject to offset? **☑** No ☐ Yes \$1,790.00 **Midland Fund** Last 4 digits of account number 3878 Nonpriority Creditor's Name When was the debt incurred? 10/01/2020 Attn: Bankruptcy Attn: Bankruptcy As of the date you file, the claim is: Check all that apply. 350 Camino De La Reine, Suite 100 Contingent Number Street Unliquidated San Diego, CA 92108 Disputed ZIP Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only ■ Student loans ☐ Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other At least one of the debtors and another similar debts Check if this claim is for a community debt $\sqrt{}$ Other. Specify **FactoringCompanyAccount** Is the claim subject to offset? **☑** No ☐ Yes \$1,490.00 Midland Fund Last 4 digits of account number 4970 Nonpriority Creditor's Name When was the debt incurred? 01/01/2021 Attn: Bankruptcy Attn: Bankruptcy As of the date you file, the claim is: Check all that apply. 350 Camino De La Reine, Suite 100 Contingent Number Street Unliquidated San Diego, CA 92108 Disputed City ZIP Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other At least one of the debtors and another similar debts ☐ Check if this claim is for a community debt $\sqrt{}$ Other. Specify Is the claim subject to offset? **FactoringCompanyAccount ☑** No Yes

Debtor 1

Maite

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Case number (if known) _

Casaldeiro

Stella

Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim \$10,328.00 **Nordstrom Signature Visa** Last 4 digits of account number 9111 Nonpriority Creditor's Name When was the debt incurred? 12/01/2012 Attn: Bankruptcy As of the date you file, the claim is: Check all that apply. PO Box 6555 Contingent Number Street Unliquidated Englewood, CO 80155-6555 ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only □ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other ■ At least one of the debtors and another similar debts Check if this claim is for a community debt $\sqrt{}$ Other. Specify CreditCard Is the claim subject to offset? **☑** No ☐ Yes \$6,577.00 Portfolio Recovery Associates, LLC Last 4 digits of account number 7160 Nonpriority Creditor's Name When was the debt incurred? 11/01/2021 Attn: Bankruptcy As of the date you file, the claim is: Check all that apply. 120 Corporate Boulevard Contingent Number Street Unliquidated Norfolk, VA 23502 ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only ■ Student loans ☐ Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other At least one of the debtors and another similar debts Check if this claim is for a community debt $\sqrt{}$ Other. Specify **FactoringCompanyAccount** Is the claim subject to offset? **☑** No ☐ Yes \$5,634.00 Portfolio Recovery Associates, LLC Last 4 digits of account number 9870 Nonpriority Creditor's Name When was the debt incurred? 04/01/2022 Attn: Bankruptcy As of the date you file, the claim is: Check all that apply. 120 Corporate Boulevard Contingent Number Street Unliquidated Norfolk, VA 23502 ZIP Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other ☐ At least one of the debtors and another similar debts ☐ Check if this claim is for a community debt $\mathbf{\Lambda}$ Other. Specify Is the claim subject to offset? **FactoringCompanyAccount ☑** No ☐ Yes

Debtor 1

Maite

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Casaldeiro

Debtor		Stella	Casaldeiro Case number (if known)	
	First Name	Middle Name	Last Name	
Part 2	2: Your NONPRIORITY Ur	nsecured Claim	ns - Continuation Page	
After	listing any entries on this pag	e, number them b	eginning with 4.5, followed by 4.6, and so forth.	Total claim
4.10	Synchrony Bank/Banana Re	public	Last 4 digits of account number 4871	<u>\$9,127.00</u>
	Nonpriority Creditor's Name		When was the debt incurred? <u>07/01/2016</u>	
	Attn: Bankruptcy Dept		As of the date you file, the claim is: Check all that apply.	
	PO Box 965060		Contingent	
	Number Street		☐ Unliquidated	
	Orlando, FL 32896-5060	State ZIP Code	Disputed	
	Who incurred the debt? Chec		·	
	Debtor 1 only	ik one.	Type of NONPRIORITY unsecured claim:	
	_		Student loans	
	Debtor 2 only		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Debtor 1 and Debtor 2 onl	•	Debts to pension or profit-sharing plans, and other	
	At least one of the debtors	and another	similar debts	
	☐ Check if this claim is for a	a community debt	☑ Other. Specify	
	Is the claim subject to offset?	•	CreditCard	
	☑ No			
	☐ Yes			
4.11	Synchrony Bank/TJX		Last 4 digits of account number 0948	\$10,687.00
	Nonpriority Creditor's Name			
	Attn: Bankruptcy Dept			
	PO Box 965064		As of the date you file, the claim is: Check all that apply. Contingent	
	Number Street		3	
	Orlando, FL 32896-5060		Unliquidated	
	•	State ZIP Code	☐ Disputed	
	Who incurred the debt? Chec	k one.	Type of NONPRIORITY unsecured claim:	
	☑ Debtor 1 only		☐ Student loans	
	☐ Debtor 2 only		Obligations arising out of a separation agreement or	
	☐ Debtor 1 and Debtor 2 onl	у	divorce that you did not report as priority claims	
	☐ At least one of the debtors	and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Check if this claim is for a	a community debt		
	Is the claim subject to offset?	,	CreditCard	
	☑ No			
	☐ Yes			
4 4 2				\$5,015.00
4.12	The Bureaus Inc Nonpriority Creditor's Name		Last 4 digits of account number 7364	
	Attn: Bankruptcy Attn: Banl	kruntev	When was the debt incurred? 12/01/2020	
	650 Dundee Rd , Ste 370	ширгоу	As of the date you file, the claim is: Check all that apply.	
	Number Street		Contingent	
	Northbrook, IL 60062		Unliquidated	
	City	State ZIP Code	Disputed	
	Who incurred the debt? Chec	k one.	Type of NONPRIORITY unsecured claim:	
	☑ Debtor 1 only		Student loans	
	Debtor 2 only		Obligations arising out of a separation agreement or	
	☐ Debtor 1 and Debtor 2 onl	у	divorce that you did not report as priority claims	
	☐ At least one of the debtors	•	Debts to pension or profit-sharing plans, and other	
	☐ Check if this claim is for a		similar debts ✓ Other Specify	
	Is the claim subject to offset?	•	Other. Specify CollectionAttorney	
	No			
	☐ Vac			

Debtor 1

Maite

Stella

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Debtor 1 Maite Stella Casaldeiro Case number (if known). Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim \$3,432.00 Last 4 digits of account number 7035 The Bureaus Inc Nonpriority Creditor's Name When was the debt incurred? 09/01/2020 Attn: Bankruptcy Attn: Bankruptcy As of the date you file, the claim is: Check all that apply. 650 Dundee Rd, Ste 370 Contingent Number Street Unliquidated Northbrook, IL 60062 ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only ■ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other ☐ At least one of the debtors and another similar debts ☐ Check if this claim is for a community debt Other. Specify CollectionAttorney Is the claim subject to offset? **☑** No ☐ Yes

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Page 29 of 64 Document Debtor 1 Casaldeiro Maite Stella Case number (if known) _ Middle Name First Name Last Name List Others to Be Notified About a Debt That You Already Listed Part 3: 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditor? Griffin, Crystal Name Line 4.3 of (Check one): Part 1: Creditors with Priority Unsecured Claims 2601 NW Expressway Ste 205E Part 2: Creditors with Nonpriority Unsecured Claims Number Street Oklahoma City, OK 73112 Last 4 digits of account number _ ZIP Code Portfolio Recovery Associates, LLC On which entry in Part 1 or Part 2 did you list the original creditor? Name Line 4.9 of (Check one): Part 1: Creditors with Priority Unsecured Claims ATTN: Andrea D. Cudjoe-Jackson Part 2: Creditors with Nonpriority Unsecured Claims 120 Corporate Blvd. Number Street Last 4 digits of account number -Norfolk, VA 23502 State ZIP Code On which entry in Part 1 or Part 2 did you list the original creditor? Rausch Sturm Name Line **4.11** of (Check one): Part 1: Creditors with Priority Unsecured Claims ATTN: Colin Patrick Brogan Part 2: Creditors with Nonpriority Unsecured Claims 15660 N. Dallas Pkwy Ste 350 Number Street Last 4 digits of account number _ Dallas, TX 75248 City ZIP Code State

Last 4 digits of account number ___

ZIP Code

State

On which entry in Part 1 or Part 2 did you list the original creditor?

_ of (Check one): Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Name

Number

City

Street

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Debtor 1 Stella Casaldeiro Maite Case number (if known) _ First Name Middle Name

Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claim** 6a. Domestic support obligations 6a. \$0.00 **Total claims** from Part 1 6b. Taxes and certain other debts you owe the 6b. \$0.00 government 6c. Claims for death or personal injury while you \$0.00 6c. were intoxicated 6d. Other. Add all other priority unsecured claims. \$0.00 6d. Write that amount here. 6e. Total. Add lines 6a through 6d. 6e. \$0.00 **Total claim** 6f. Student loans 6f. \$0.00 **Total claims** from Part 2 6g. Obligations arising out of a separation \$0.00 6g. agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and \$0.00 6h. other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6j. Total. Add lines 6f through 6i. 6j. \$84,706.00

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Fill in this information	n to identify your case	:		
Debtor 1	Maite	Stella	Casaldeiro	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the:		Eastern District of Texas	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☑ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or o	company with whom you ha	ve the contract or lease	State what the contract or lease is for
2.1				
	Name			
	Number	Street		
	City	State	ZIP Code	
2.2				
	Name			
	Number	Street		
	City	State	ZIP Code	
2.3				
	Name			
	Number	Street		
	City	State	ZIP Code	
2.4				
	Name			
	Number	Street		
	City	State	ZIP Code	

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Fill	in this information	to identify your case:					
De	ebtor 1	Maite	Stella	Casaldeiro			
		First Name	Middle Name	Last Name	_		
_	ebtor 2 bouse, if filing)						
(Or	ouse, ii iiiiig)	First Name	Middle Name	Last Name			
Un	ited States Bankru	iptcy Court for the:		Eastern District of 1	<u>Texas</u>		
	se number _ known)						Check if this is an amended filing
Off	icial Form	<u>106H</u>					
Sc	hedule H	l: Your Co	debtors				12/15
toget in the	ther, both are equa	ally responsible for s	supplying correct	t information. If mo	re space is needed,	nd accurate as possible. If tw copy the Additional Page, fill s, write your name and case r	it out, and number the entries
1.	•	y codebtors? (If you	are filing a joint	case, do not list eithe	er spouse as a codet	otor.)	
	☑ No ☐ Yes						
2.	Within the last 8 Idaho, Louisiana No. Go to line ✓ Yes. Did your	a, Nevada, New Mexi	co, Puerto Rico,	Texas, Washington,	and Wisconsin.)	ity property states and territori	es include Arizona, California,
	√ No						
	Yes. In wh	nich community state	or territory did y	ou live?		Fill in the name and current	address of that person.
	Name					<u>-</u>	
	Number	Street					
	City		State ZIP Cod	le		_	
3.	again as a code	btor only if that pers	son is a guaranto	or or cosigner. Make	sure you have liste	ouse is filing with you. List the d the creditor on Schedule D schedule E/F, or Schedule G to	Official Form 106D),
	Column 1: Your c	odebtor				Column 2: The creditor to who	m you owe the debt
						Check all schedules that app	•
3.1						Schedule D, line	
	Name					Schedule E/F, line	

Number

City

Street

State

ZIP Code

Schedule G, line

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Fill	in this information	to identify your ca	se:									
D	ebtor 1	Maite	Stella	Casalo	deiro							
		First Name	Middle Name	Last Nar	me							
	ebtor 2 pouse, if filing)								Observatorit (h		
(3	pouse, ii iiiiig)	First Name	Middle Name	Last Na					Check if t	nıs ıs: ended filing		
U	nited States Bankru	ptcy Court for the	<u> </u>	Eastern Di	strict of Tex	kas		-	_	ended ming plement sho	wina nost	netition
_	ase number _ known)											following date:
(Talewilly								NANA / F	DD / YYYY	_	
∩f	ficial Form	1061							IVIIVI / L	וווו / טכ		
			om o									
	chedule 1:											12/15
Pa	Fill in your emplo	your name and c			er every qu							
	information.				Debtor 1				Deb	tor 2 or non	-filing spo	ouse
	If you have more t		Employment statu	ıs 🗆	Employed	\mathbf{Q}^{N}	lot Employ	ed	□ _{Empl}	oyed \square Not	Employe	d
	attach a separate information about		Occupation									
	employers.			_								
	Include part time, self-employed wor	seasonal, or	Employer's name	_								
			Employer's addres	_								
	Occupation may in or homemaker, if i			N	Number Stree	ŧt			Number	Street		
				_								
				_								
				_	City		State	Zip Code	City		State	Zip Code
			How long employe		,ity		State	Zip Code	City		State	Zip Code
			now long employe	su mere: _							_	
Pa	rt 2: Give Deta	ils About Mont	hly Income									
			date you file this f	orm. If you	have nothin	ıg to ı	report for a	ny line, write	\$0 in the space	e. Include yo	our non-fil	ing spouse
	unless you are se	•	e more than one em	nnlover com	nhine the inf	forms	ation for all	employers fo	or that nerson o	n the lines h	elow If v	ou need
	more space, attac			ipioyoi, coll	10/110 (ITC IIII	OHIIC	on ioi all		n that person t		CIOW. II y	ou noou
							Fo	r Debtor 1	For Debtor			
2.	List monthly gros		and commissions (culate what the more			2.		\$0.00		\$0.00		
2	•			nany waye v	voulu DE.							
ა.	Estimate and list	monuny overtime	pay.			3.	+	\$0.00	+	\$0.00		

\$0.00

\$0.00

4. Calculate gross income. Add line 2 + line 3.

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Debtor 1 Maite Stella Casaldeiro Case number (if known)

Last Name

First Name

Middle Name

			For Debtor 1		For Debtor 2 or non-filing spouse	
	Copy line 4 here→	4.	\$0.00		\$0.00	
5.	List all payroll deductions:					
	5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00		\$0.00	
	5b. Mandatory contributions for retirement plans	5b.	\$0.00		\$0.00	
	5c. Voluntary contributions for retirement plans	5c.	\$0.00		\$0.00	
	5d. Required repayments of retirement fund loans	5d.	\$0.00		\$0.00	
	5e. Insurance	5e.	\$0.00		\$0.00	
	5f. Domestic support obligations	5f.	\$0.00		\$0.00	
	5g. Union dues	5g.	\$0.00		\$0.00	
	5h. Other deductions. Specify:		+ \$0.00	. +	\$0.00	
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	\$0.00		\$0.00	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00		\$0.00	
8.	List all other income regularly received:	• •				
0.	8a. Net income from rental property and from operating a business, profession, or farm					
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00		\$0.00	
	8b. Interest and dividends	8b.	\$0.00		\$0.00	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	ob.	<u> </u>		\$0.00	
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00		\$0.00	
	8d. Unemployment compensation	8d.	\$0.00		\$0.00	
	8e. Social Security	8e.	\$1,449.00		\$0.00	
	8f. Other government assistance that you regularly receive	00.	<u> </u>		Ψ0.00	
	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.					
	Specify:	8f.	\$0.00		\$0.00	
	8g. Pension or retirement income	8g.	\$0.00		\$0.00	
	8h. Other monthly income. Specify:	8h.	+ \$0.00	. + 	\$0.00	
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$1.449.00] [\$0.00	
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse	10.	\$1,449.00]+[\$0.00	= \$1,449.00
11.	State all other regular contributions to the expenses that you list in Scheo	dule J.				
	Include contributions from an unmarried partner, members of your househol friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that a					
	Specify: Assistance from Brother				11. •	+ \$350.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The			y incor		\$1,700,00
	amount on the Summary of Your Assets and Liabilities and Certain Statistics	ai ii ii Offfic	авон, в в аррпеѕ		12.	\$1,799.00 Combined
						monthly income
13.	Do you expect an increase or decrease within the year after you file this for	orm?				
	√ No.					
	Yes. Explain:					

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Fill	l in this information	to identify your case	e:				
D	ebtor 1	Maite	Stella	Casaldeiro		eck if this is:	
		First Name	Middle Name	Last Name		An amended filir	nα
_	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name		A supplement sh	nowing postpetition chapter 13 he following date:
υ	nited States Bankr	uptcy Court for the:		Eastern Distric	t of Texas		
С	ase number					MM / DD / YYYY	
(if	known)						
Of	ficial Form	106J					
Sc	chedule J	J: Your Ex	penses				12/15
Be a spa	as complete and a ce is needed, attac	ccurate as possible ch another sheet to	. If two married pe				ing correct information. If more (if known). Answer every question.
Pa	rt 1: Describe	Your Household					
1.	Is this a joint cas	se?					
	No. Go to line						
		btor 2 live in a sepa	rate household?				
	U _{No} □voo	Debter 2 must file C	Official Form 106 L	O. Evmanaga far	Separate Household of Debtor 2	0	
2	Do you have dep		_	z, Expenses ior	Separate Houserloid of Deptor 2	2.	
۷.	Do not list Debtor		✓ No		Dependent's relationship to	Dependen	t's Does dependent live
	Debtor 2.		Yes. Fill out the for each dependent	ndent	Debtor 1 or Debtor 2	age	with you?
	Do not state the onames.	dependents'					— No. ☐ Yes.
							—— No. ☐ Yes.
					,		— No. ☐ Yes.
							— No. ☐ Yes.
2	Do your eypened	ac includo	✓No				
3.	Do your expense expenses of peo yourself and you	ple other than	Yes				
			=				
		Your Ongoing M					
					using this form as a supplement eck the box at the top of the for		B case to report expenses as of a applicable date.
		id for with non-cash have included it on					Your expenses
4.	The rental or hor for the ground or		nses for your resid	dence. Include f	irst mortgage payments and any	rent 4.	\$0.00
	If not included in	line 4:					
	4a. Real estate ta					4a.	\$530.00
		neowner's, or renter's	s insurance			4b.	\$0.00
		nance, repair, and u				4c.	\$0.00
		s association or cond				4d.	\$0.00

4d. Homeowner's association or condominium dues

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Debtor 1 Maite Stella Casaldeiro Case number (if known) ________

First Name Middle Name Last Name

	You	ur expenses
. Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
. Utilities:		
6a. Electricity, heat, natural gas	6a. <u>—</u>	\$150.00
6b. Water, sewer, garbage collection	6b	\$100.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$51.00
6d. Other. Specify:	6d	\$0.00
Food and housekeeping supplies	7.	\$200.00
Childcare and children's education costs	8.	\$0.00
. Clothing, laundry, and dry cleaning	9.	\$75.00
Personal care products and services	10.	\$75.00
1. Medical and dental expenses	11.	\$50.00
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 	12.	\$200.00
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$25.00
4. Charitable contributions and religious donations	14.	\$0.00
 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 		
15a. Life insurance	15a. —	\$0.00
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance	15c	\$0.00
15d. Other insurance. Specify: See Additional Page	15d	\$324.00
6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify:	16.	\$0.00
7. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a	\$0.00
17b. Car payments for Vehicle 2	17b	\$0.00
	17c	\$0.00
17c. Other. Specify:	17d.	\$0.00
17d. Other. Specify:		, , ,
 Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 	18.	\$0.00
9. Other payments you make to support others who do not live with you.		4-
Specify:	19.	\$0.00
0. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income	e.	
20a. Mortgages on other property	20a	\$0.00
20b. Real estate taxes	20b.	\$0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

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Deb	Debtor 1 Maite Stella Casaldeiro			Case number (if known)	
		First Name	Middle Name	Last Name		
21.	Other. Spe	ecify:			21.	+\$0.00
22.	Calculate y	your monthly exp	penses.			
	22a. Add li	ines 4 through 21.			22a.	\$1,780.00
	22b. Copy	line 22 (monthly	expenses for Debtor 2),	if any, from Official Form 106J-2	22b.	\$0.00
	22c. Add li	ne 22a and 22b. ⁻	The result is your month	ly expenses.	22c.	\$1,780.00
					L	
23.	Calculate y	your monthly net	income.			
	23а. Сору	line 12 (your com	nbined monthly income)	from Schedule I.	23a.	\$1,799.00
	23b. Copy	your monthly exp	enses from line 22c abo	ove.	23b.	- \$1,780.00
	23c. Subtra	act your monthly	expenses from your mo	nthly income.]	
	The re	esult is your mon	thly net income.		23c.	<u>\$19.00</u>
24.	Do you ex	pect an increase	or decrease in your ex	penses within the year after you fil	e this form?	
				r car loan within the year or do you e of a modification to the terms of you		
	☑ No. ☐ Yes.	None				

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Debtor 1	Maite	Stella	Casaldeiro	Case number (if known)
	First Name	Middle Name	Last Name	
				Amount
45 1 01	I			
15d. Other				
WestG	uard Ins			\$126.00
Allstate	e Ins			\$198.00
				,

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Fill in this information	n to identify your case	t		
Debtor 1	Maite	Stella	Casaldeiro	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the:		Eastern District of Texas	
Case number				
(if known)				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$264,272.00
	\$75,696,06
1b. Copy line 62, Total personal property, from Schedule A/B	<u>\$75,686.96</u>
1c. Copy line 63, Total of all property on Schedule A/B	\$339,958.96
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$84,706.00
Your total liabilities	\$84,706.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$1,799.00
·	\$1,799.00
Copy your combined monthly income from line 12 of Schedule I	\$1,799.00 \$1,780.00

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Debtor 1 Maite Stella Casaldeiro Case number (if known) _____

Last Name

First Name

Middle Name

Part 4: Answer These Questions for Administrative and Statistical Records		
6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to t	he court with your other sched	lules.
 7. What kind of debt do you have? ✓ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 ✓ Your debts are not primarily consumer debts. You have nothing to report on this part of the fourth this form to the court with your other schedules. 	U.S.C. § 159.	t
3. From the Statement of Your Current Monthly Income: Copy your total current monthly income from 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	n Official	\$0.00
9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$0.00	
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00	
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00	
9d. Student loans. (Copy line 6f.)	\$0.00	
9e.Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00	
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00	
9g. Total . Add lines 9a through 9f.	\$0.00	

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Fill in this information	to identify your case	:		
Debtor 1	Maite	Stella	Casaldeiro	
	First Name	Middle Name	Last Name	<u>. </u>
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankr	ruptcy Court for the:		Eastern District of Texas	
Case number (if known)				

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below	
Did yo	u pay or agree to pay someone who is NOT an attorney to help you fill	out bankruptcy forms?
√ No		
Yes	s. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under	penalty of perjury, I declare that I have read the summary and schedul	es filed with this declaration and that they are true and correct.
-	s/ Maite Stella Casaldeiro aite Stella Casaldeiro, Debtor 1	
Da	ate 01/12/2023 MM/ DD/ YYYY	

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Fill in this information	n to identify your case	:	
Debtor 1	Maite	Stella	Casaldeiro
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bank	ruptcy Court for the:		Eastern District of Texas
Case number (if known)			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

_	ent marital status?				
■ Married					
Not married					
Ouring the last 3	years, have you lived anywhe	re other than where you li	ve now?		
No					
Yes. List all of	the places you lived in the last	3 years. Do not include w	nere you live now.		
Debtor 1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
			☐ Same as Debtor 1		☐ Same as Debtor 1
I3121 Overlook C	Crest Dr. 100	From 08/2019			From
umber Street		To <u>03/2020</u>	Number Street		 To
Fort Worth, TX 76	2477	_			-
ity	State ZIP Code	_	City	State ZIP Code	-
			☐ Same as Debtor 1		Same as Debtor 1
		From			From
umber Street		To	Number Street		
ity	State ZIP Code	_	City	State ZIP Code	-
Vithin the last 8 v	/ears, did you ever live with a	spouse or legal equivaler	nt in a community property	state or territory?(Com	munity property states an
itories include Ar	izona, California, Idaho, Louisi	ana, Nevada, New Mexico	, Puerto Rico, Texas, Wash	nington, and Wisconsin.)	mamy property etailed an
∕ Í No					
Tyes Make sur	e you fill out Schedule H: Your	Codebtors (Official Form	106H).		

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Document Page 43 of 64 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. **√** No Yes. Fill in the details. Debtor 2 Debtor 1 Sources of income **Gross Income** Sources of income **Gross Income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) Wages, commissions, ■ Wages, commissions, From January 1 of current year until the bonuses, tips bonuses, tips date you filed for bankruptcy: Operating a business Operating a business ■ Wages, commissions, ■ Wages, commissions, For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2022 Operating a business Operating a business For the calendar year before that: ■ Wages, commissions, ■ Wages, commissions, bonuses, tips bonuses, tips (January 1 to December 31, 2021 Operating a business Operating a business 5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. ☐ No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross Income from** each source each source Describe below. Describe below. (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy:

For last calendar year:

(January 1 to December 31,

For the calendar year before that:

(January 1 to December 31, 2021

YYYY

\$15,780.00

\$16,830.00

\$7.086.00

Social Security

Social Security

Capital Gains

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Maite Stella Casaldeiro Case number (if known) _______

ebtor 1	Maite	Stella	Casaldeire	0	_ Case	number (if	known)
	First Nam						
Part 3: Li	ist Certain	Payments You Made	e Before You Filed	for Bankruptcy			
6. Are eithe	er Debtor 1's	or Debtor 2's debts prim	narily consumer debts	s?			
☐ No.		otor 1 nor Debtor 2 has Il primarily for a persona			ts are defined in 11 U	.S.C. § 101	(8) as "incurred by
		00 days before you filed	•	• •	otal of \$7,575* or mo	re?	
	☐ No. Go to	o line 7.					
	pa	st below each creditor to aid that creditor. Do not of include payments to a	include payments for	domestic support obl			
	* Subject to	adjustment on 4/01/25 a	and every 3 years afte	er that for cases filed	on or after the date of	adjustmen	t.
√ Yes.	Debtor 1 or	Debtor 2 or both have	orimarily consumer d	ebts.			
		00 days before you filed	-		otal of \$600 or more?	,	
	☑ No. Go to	o line 7.					
	in	st below each creditor to clude payments for dom n attorney for this bankru	estic support obligation		,	•	
			Dates of payment	Total amount pa	id Amount you	still owe	Was this payment for
-				•			☐Mortgage
-	Creditor's Name	9	_	-			☐ Car
				_			☐ Credit card
I	Number Str	eet					Loan repayment
-			_	-			Suppliers or vendors
-	City	State ZIP Code	_				Other
<i>Insider</i> s ind you are an	clude your rela officer, direct		ners; relatives of any gowner of 20% or more	general partners; part e of their voting secu	nerships of which you ities; and any managi	ı are a gene ng agent, ir	eral partner; corporations of whi ncluding one for a business you
_	ist all navme	nts to an insider.					
	pay		Dates of	Total amount paid	Amount you still	Posson	for this payment
			payment	iotai amount paid	owe	Reason	ior triis payment
Insider's N	Name						
Number	Street	_					

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otor 1	Maite Stella	Casalde	iro	Case n	umber (if know	n)
	First Name Middle	Name Last Nam	ne	_		
	before you filed for bank		payments or transfer	any property on accou	ınt of a debt th	nat benefited an inside
	its on debts guaranteed or	cosigned by an insider.				
√ No						
Yes. List a	Il payments that benefited	an insider.				
		Dates of	Total amount paid	Amount you still	Reason for t	his navment
		payment	Total amount paid	owe	Include credit	
					molado orodio	
Insider's Name						
N 1 0						
Number Stre	еет					
City	State ZIP Coo	<u> </u>				
City	State ZIF Cot					
ontract dispute						
Yes. Fill in	the details.					
		Nature of the case	Cou	ırt or agency		Status of the case
		Debt Claim				
Case title	SYNCHRONY BANK vs Maite Casaldeiro	Dobt Glaim		ce Court Precinct 4		√ Pending
0		-		Name Canyon Falls Drive Su	ita 101	On appeal
Case number	C21-466J4	-	Numb		ite for	☐ Concluded
				le, TX 76226		
			City	State	ZIP Code	
Case title	CITIBANK, N.A. vs Maite	Debt Claim	1	on Count Department 4		Don't in
	S Casaldeiro	_		ce Court Precinct 4 Name		Pending
Case number	C21-488J4		6200) Canyon Falls Drive Su	ite 101	On appeal
		-	Numb			Concluded
			Argy City	le, TX 76226 State	ZIP Code	
			Jily	State	2 Oue	
Case title	Portfolio Recovery	Debt Claim	Justi	ce Court Precinct 4		✓ Pending
	Associates, Llc vs Maite			Name		On appeal
	S Casaldeiro	-		Canyon Falls Drive Su	ite 101	☐ Concluded
Case number	C22-1339J4	_	Numb			Concluded
			Argy City	le, TX 76226 State	ZIP Code	
			1 7			

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				Case number (if known)
	First Name	Middle Name	Last Name	
	year before you fi t apply and fill in t		was any of your property repossessed, t	foreclosed, garnished, attached, seized, or levied?
√ No. Go				
— □Yes. Fill	in the information	n below.		
_ 100.1 III	in the information	i bolow.	Describe the manager.	Data Value of the preparty
			Describe the property	Date Value of the property
Creditor's Na				
reditor's ina	ime			
Number	Street		Explain what happened	
			☐ Property was repossessed.	
			Property was foreclosed.	
			Property was garnished.	
City	Sta	ate ZIP Code	Property was attached, seized	d, or levied.
\\/;4b:n 00	dovo botovo vov	filed for bonky into	ar did ony araditar including a bank or fir	annial institution and off any amounts from your accounts as
		tilled for bankrupto cause you owed a d		nancial institution, set off any amounts from your accounts or
√ No				
Yes. Fill	in the details.			
			Describe the action the creditor took	Date action was Amount
- Pr. 1 N				taken
Creditor's Na	ime			
Number	Street			
Number	Street			
	Street Stat	te ZIP Code	Lost 4 digits of account numbers VVVV	
		te ZIP Code	Last 4 digits of account number: XXXX-	
		te ZIP Code	Last 4 digits of account number: XXXX-	
City . Within 1	Stat year before you fi	iled for bankruptcy	, was any of your property in the possess	sion of an assignee for the benefit of creditors, a court-
City . Within 1 ypointed re	Stat year before you fi		, was any of your property in the possess	
City . Within 1 y pointed re ✓ No	Stat year before you fi	iled for bankruptcy	, was any of your property in the possess	
City 2. Within 1 yppointed re	Stat year before you fi	iled for bankruptcy	, was any of your property in the possess	
City . Within 1 yopointed re No Yes	Stat year before you fi ceiver, a custodia	iled for bankruptcy an, or another offic	, was any of your property in the possess ial?	
City 2. Within 1 yopointed re 1 No Yes	Stat year before you fi ceiver, a custodia	iled for bankruptcy	, was any of your property in the possess ial?	
City . Within 1 yppointed re . Yes rt 5: List	Stat year before you fi ceiver, a custodia t Certain Gifts	iled for bankruptcy an, or another offic and Contributio	was any of your property in the possessial?	ion of an assignee for the benefit of creditors, a court-
. Within 1 y pointed re No Yes T 5: List	Stat year before you fi ceiver, a custodia t Certain Gifts	iled for bankruptcy an, or another offic and Contributio	, was any of your property in the possess ial?	ion of an assignee for the benefit of creditors, a court-
. Within 1 ypointed re No Yes Tt 5: List . Within 2 y	Stat year before you fi ceiver, a custodia t Certain Gifts years before you	iled for bankruptcy an, or another offic and Contributio	was any of your property in the possessial?	ion of an assignee for the benefit of creditors, a court-
City 2. Within 1 yppointed re 1 No Yes 1 S: List 3. Within 2 y	Stat year before you fi ceiver, a custodia t Certain Gifts	iled for bankruptcy an, or another offic and Contributio	was any of your property in the possessial?	ion of an assignee for the benefit of creditors, a court-
City 2. Within 1 yppointed re 1 No Yes 1 S: List 3. Within 2 y	Stat year before you fi ceiver, a custodia t Certain Gifts years before you	iled for bankruptcy an, or another offic and Contributio	was any of your property in the possessial?	ion of an assignee for the benefit of creditors, a court-
City 2. Within 1 yppointed re 1 No Yes 1 S. Within 2 y No	Stat year before you fi ceiver, a custodia t Certain Gifts years before you	iled for bankruptcy an, or another offic and Contributio	was any of your property in the possessial?	ion of an assignee for the benefit of creditors, a court-
City 2. Within 1 yppointed re 1 No Yes 1 5: List 3. Within 2 y	Stat year before you fi ceiver, a custodia t Certain Gifts years before you	iled for bankruptcy an, or another offic and Contributio	was any of your property in the possessial?	ion of an assignee for the benefit of creditors, a court-

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	Maite	Stella	Casaldeiro	Case number (if know	wn)
	First Name	Middle Name	Last Name		
Gifts with per perso	a total value of more t	han \$600	Describe the gifts	Dates you gave the gifts	Value
Person to W	hom You Gave the Gift		-		
			_		
Number :	Street		_		
City	State	ZIP Code			
Person's re	elationship to you				
<mark>ե. Within 2</mark> չ	years before you filed t	or bankrupto	y, did you give any gifts or contributions w	ith a total value of more than \$60	00 to any charity?
√ No					
Yes. Fill	in the details for each	gift or contrib	ution.		
	ontributions to charitie more than \$600	s Descr	ibe what you contributed	Date you contributed	Value
Charity's Nan	me				
orianty or tan					
Number	Street				
Number 3	Street				
Number :	Street State ZIP C	ode			
		ode			
		ode			
City		ode			
City	State ZIP Co	ode			
City rt 6: List	State ZIP Co t Certain Losses		or since you filed for bankruptcy, did you	lose anything because of theft, f	ire, other disaster, or
City rt 6: List 5. Within 1 yambling?	State ZIP Co t Certain Losses		or since you filed for bankruptcy, did you	lose anything because of theft, f	ire, other disaster, or
City rt 6: List 5. Within 1 yambling?	State ZIP Co t Certain Losses		or since you filed for bankruptcy, did you	lose anything because of theft, fi	ire, other disaster, or
City City 5. Within 1 yambling?	State ZIP Co t Certain Losses		or since you filed for bankruptcy, did you	lose anything because of theft, fi	ire, other disaster, or
City Tt 6: List 5. Within 1 yambling? No Yes. Fill	State ZIP Control of the Control of	r bankruptcy			ire, other disaster, or Value of property lost
City Tt 6: List 5. Within 1 yambling? No Yes. Fill Describe	State ZIP Control of the Control of	r bankruptcy nd Describ	e any insurance coverage for the loss the amount that insurance has paid. List per the claims on line 33 of Schedule A/B: Proper	Date of your loss	
City Tt 6: List Within 1 ymbling? No Yes. Fill Describe	State ZIP Control of the Control of	r bankruptcy nd Describ	e any insurance coverage for the loss the amount that insurance has paid. List per	Date of your loss	

Case 23-40077 Doc 1 Filed 01/12/23 Entered 01/12/23 19:04:58 Desc Main Page 48 of 64 Document Casaldeiro Debtor 1 Maite Stella Case number (if known) First Name Middle Name Last Name Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Description and value of any property transferred Amount of payment Date payment or transfer was made Thomas A Ford, AAL PLLC Person Who Was Paid Attorney's Fee 09/28/2022 \$1,130.00 99 Trophy Club Dr. Number Street Roanoke, TX 76262-5422 City State ZIP Code thomas@attornevford.com Email or website address Leonardo Casaldeiro (Brother) Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. **✓** No ☐ Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was made Person Who Was Paid Number Street City State ZIP Code 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. **✓** No Yes. Fill in the details.

Case 23-40077 Doc 1 Filed 01/12/23 Entered 01/12/23 19:04:58 Desc Main Page 49 of 64 Document Casaldeiro Debtor 1 Maite Stella Case number (if known) Last Name First Name Middle Name Description and value of property Date transfer was Describe any property or payments transferred received or debts paid in exchange Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you _ 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) **✓** No Yes. Fill in the details. Date transfer was Description and value of the property transferred made Name of trust. List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. **✓** No

Yes. Fill in the details.				
	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Name of Financial Institution	XXXX	☐ Checking		
Number Street		☐ Savings ☐ Money market ☐ Brokerage		
City State ZIP Code		Other		
State ZIP Code				

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

■No

Yes. Fill in the details.

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 Maite
 Stella
 Casaldeiro
 Case number (if known)
 Case number (if known)

		Stella	Casa			Case number (if known)	
	First Name	Middle Na	ime Last N	Name			
			Who else had acce	ess to it	?	Describe the contents	Do you still have
						divorce papers and other important papers	itr
Bank of A						divorce papers and other important papers	□No
Name of Fi	inancial Institution	1	Name				√ Yes
353 Trop	hy Lake Drive						
Number	Street		Number Street				
Roanoke	e, TX 76262	-	City	State	ZIP Code		
City		ZIP Code					
☑No ☑Yes. F	ill in the details.		Who else has or h	ad acce	ess to it?	Describe the contents	Do you still have
							it?
Dublic Ct	10.000					closed approx 8 months ago. Rental was in	✓No
Public St Name of St	torage Facility		Name	-		her name, but all contents belonged to	
	,					ex-partner.	Yes
	le Earnhardt Blvd						
Number	Street	1	Number Street				
		-	City	State	ZIP Code		
Roanoke	e, TX 76262	ZIP Code	,	Ciuio	0000		
City	State						
	State						
City	entify Property Y	ou Hold or	Control for Som	neone E	Else		
City rt 9: Ide	entify Property Y					erty you borrowed from, are storing for, or ho	ld in trust for some
rt 9: Ide	entify Property Y					erty you borrowed from, are storing for, or ho	ld in trust for some
city rt 9: Ide 3. Do you √1No	entify Property Y					erty you borrowed from, are storing for, or ho	ld in trust for some
rt 9: Ide 3. Do you √1 No	entify Property Y hold or control any	property that		ns? Incl		erty you borrowed from, are storing for, or ho Describe the property	ld in trust for some
rt 9: Ide 3. Do you 1 No Yes. F	entify Property Y hold or control any ill in the details.	property that	someone else owi	ns? Incl			
rt 9: Ide 3. Do you 1 No Yes. F	entify Property Y hold or control any ill in the details.	property that	Someone else own	ns? Incl			
rt 9: Ide 3. Do you ☑ No ☐ Yes. F	entify Property Y hold or control any ill in the details.	property that	Someone else own	ns? Incl			
rt 9: Ide 3. Do you ☑ No ☐ Yes. F	entify Property Y hold or control any ill in the details.	property that	Where is the proportion	ns? Incli	lude any prope		
rt 9: Ide 3. Do you √1 No	entify Property Y hold or control any ill in the details.	property that	Someone else own	ns? Incl			
rt 9: Ide 3. Do you ☑ No ☐ Yes. F	entify Property Y hold or control any ill in the details.	property that	Where is the proportion	ns? Incli	lude any prope		

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			Document	raye 31 01 04		
Debtor 1	Maite	Stella	Casaldeiro		Case number (if known)	_
	First Name	Middle Name	Last Name			
Part 10: Giv	e Details About	Environmental Inf	formation			

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

nu may be liable or potentially nental unit	Environmental law, if you know it	Date of notice
nental unit	Environmental law, if you know it	Date of notice
nental unit	Environmental law, if you know it	Date of notice
nental unit	Environmental law, if you know it	Date of notice
Street		
State ZIP Code		
nmental unit	Environmental law, if you know it	Date of notice
nental unit		
Street		
State ZIP Code		
r	y release of hazardous mater nmental unit nental unit Street	y release of hazardous material? nmental unit Environmental law, if you know it nental unit Street

Case 23-40077 Doc 1 Filed 01/12/23 Entered 01/12/23 19:04:58 Desc Main Page 52 of 64 Document Casaldeiro Debtor 1 Maite Stella Case number (if known) First Name Middle Name Last Name Nature of the case Status of the case Court or agency Case title. Pending **Court Name** On appeal ☐ Concluded Number Street Case number City State **ZIP Code** Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation ✓ No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Name Number Dates business existed Name of accountant or bookkeeper From ____ _ To _ City State **ZIP Code** 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. **√**No ☐ Yes. Fill in the details below. Date issued MM / DD / YYYY Name Number Street City State **ZIP Code**

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Debtor 1

 Maite
 Stella
 Casaldeiro
 Case number (if known)

 First Name
 Middle Name
 Last Name

Part 12: Sign Below	
I have read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and I de and correct. I understand that making a false statement, concealing property, or obtaining metankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both	noney or property by fraud in connection with a
/s/ Maite Stella Casaldeiro Signature of Maite Stella Casaldeiro, Debtor 1	
Date <u>01/12/2023</u>	
Did you attach additional pages to your Statement of Financial Affairs for Individuals Filing to	for Bankruptcy (Official Form 107)?
☑ No □ Yes	
Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy	forms?
√dNo	Attack the Deutsminter Detition Drawning Nation
☐ Yes. Name of person	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this information	ill in this information to identify your case:					
Debtor 1	Maite	Stella	Casaldeiro			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bank	ruptcy Court for the:		Eastern District of Texas			
Case number (if known)						

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral

What do you intend to do with the property that secures Did you claim the property as a debt?

Example 1. Example 2. Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

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rmation be	elow. Do not list rea	Il estate leases. Unexp	ts and Unexpired Leases (Official Form 106G), fill in the effect; the lease period has not yet ended. You may assume a
Describe y	our unexpired pers	sonal property leases	Will the lease be assumed?
essor's na	me:		☐ No
escription roperty:	of leased		☐ Yes
essor's na	me:		☐ No
escription roperty:	of leased		☐ Yes
essor's na	me:		□ No
Description roperty:	of leased		☐ Yes
essor's na	me:		□ No
Description property:	of leased		☐ Yes
.essor's na	me:		□ No
escription roperty:	of leased		☐ Yes
essor's na	me:		□ No
escription roperty:	of leased		☐ Yes
essor's na	me:		□ No
escription roperty:	of leased		☐ Yes
t 2. Sign	n Below		

Date 01/12/2023 MM/ DD/ YYYY

Signature of Debtor 1

page 2

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court

Eastern District of Texas

In re	(Casaldeiro, Maite Stella						
		Case No.						
Debte	or	Chapter7						
		DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR						
1.	con	rsuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debenpensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:	or services rendered					
	For	legal services, I have agreed to accept	\$2,130.00					
	Pric	or to the filing of this statement I have received	\$2,130.00					
	Bal	ance Due	\$0.00					
2.	The	e source of the compensation paid to me was:						
		Debtor						
3.	The	e source of compensation to be paid to me is:						
	√	Debtor						
4.		I have not agreed to share the above-disclosed compensation with any other person unless they are members firm.	and associates of my					
	_	I have agreed to share the above-disclosed compensation with a other person or persons who are not member firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is at	•					
5.	In r	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	a.	 Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; 						
	b.	b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;						
	C.	Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings	s thereof;					
6.	Ву	agreement with the debtor(s), the above-disclosed fee does not include the following services:						

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B2030 (Form 2030) (12/15)

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

01/12/2023

/s/ Thomas Allen Ford

Date

Thomas Allen Ford
Signature of Attorney

Bar Number: 24032068 Thomas A Ford, AAL PLLC 99 Trophy Club Dr Trophy Club, TX 76262-5422 Phone: (817) 541-6310

Thomas A Ford, AAL PLLC

Name of law firm

Fill		to identify your case:		lad 01/19/	22 Enta	rad 01			ox only as directed in the	is form and in
	Till tills information	to lacitary your case.						orm 122A-1		
D	ebtor 1	Maite First Name	Stella Middle Name	Casaldeiro Last Name	1		5	1 1. There is	s no presumption of abu	ise.
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name				of abuse a	culation to determine if applies will be made und stranged to the control of the culture of the cult	der Chapter 7
	nited States Bankry	into / Court for the	ı	Eastern Distric	t of Toyas			_	•	,
С	nited States Bankru ase number	apicy Court for the.		_astern Distric	LOI IEXAS			■3. The Me of qualified	ans Test does not apply d military service but it o	now because ould apply later.
(if	known)							Check if the	nis is an amended filing	
∩f	ficial Form	122A-1								
			t of Volum	Curron	+ 1 / 0 10 +	ما برا ما		•		
	•	Statement				-				12/19
atta and beca with	ch a separate shee case number (if kr ause of qualifying in this form.	t to this form. Includ nown). If you believe	de the line number that you are exer nplete and file <i>Sta</i>	r to which the a	additional info	ormation a of abuse be	pplies. (ecause y	On the top of ou do not h	ing accurate. If more s f any additional pages, ave primarily consume 707(b)(2) (Official Forn	write your name r debts or
1.	What is your mar	ital and filing status	? Check one only.							
		ill out Column A, line	•							
		our spouse is filing v				2-11.				
	_	our spouse is NOT f		-						
		he same household	_	-						
	under per		ou and your spous	se are legally s	eparated unde	er nonbank	cruptcy la	aw that applic	ng this box, you declare es or that you and your 07(b)(7)(B).	
10 va ex	01(10A). For examparied during the 6 m	ole, if you are filing or nonths, add the incor	n September 15, the september	he 6-month per and divide the	riod would be total by 6. Fil	March 1 the	rough Au ult. Do n	ugust 31. If the otinclude and the otinclude and the otinclude and the otincle	ile this bankruptcy cas he amount of your moning income amount more we nothing to report for Column B	thly income than once. For
							Debtor		Debtor 2 or non-filing spouse	
2.	Your gross wages deductions).	s, salary, tips, bonus	ses, overtime, and	l commissions	(before all pa	yroll		\$0.00		
3.	Alimony and main is filled in.	ntenance payments.	. Do not include pa	ayments from a	spouse if Col	umn B		\$0.00		
4.	your dependents, unmarried partner roommates. Include	any source which a including child sup members of your he de regular contribution ents you listed on line	pport. Include reguousehold, your depons from a spouse	llar contribution pendents, pare	is from an nts, and			\$0.00		
5.	Net income from or farm	operating a busines	s, profession,	Debtor 1	Debtor 2					
	Gross receipts (be	efore all deductions)		\$0.00						
	Ordinary and nece	essary operating exp	enses	- \$0.00						
	Net monthly incon	ne from a business, p	profession, or farm	\$0.00		Copy here →		\$0.00		
6.	Net income from	rental and other rea	I property	Debtor 1	Debtor 2					
	Gross receipts (be	efore all deductions)		\$0.00	Debioi 2					
	. `	essary operating exp	enses	- \$0.00	_					
	,	, , , , , , , , , , , , , , , , , , ,				Сору				
	Net monthly incon	ne from rental or other	er real property	\$0.00		here		\$0.00		
7	Interest albeiden	o and revelule -				\rightarrow		\$0.00		
1.	Interest, dividend	s. and rovaities						ψυ.υυ		

De	Case 23-40077 Doc 1 F		ered 01/12/23 19:0	4:58 Desc Mail	ı
	First Name Middle Name	Document Page	59 of 64 Case n		
			Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	8. Unemployment compensation		\$0.00		
	Do not enter the amount if you contend that the an under	mount received was a benefit			
	the Social Security Act. Instead, list it here:				
	For you	\$1,315	00		
	For your spouse				
	 Pension or retirement income. Do not include any benefit under the Social Security Act. Also, except do not include any compensation, pension, pay, ar United States Government in connection with a dis disability, or death of a member of the uniformed s retired pay paid under chapter 61 of title 10, then it that it does not exceed the amount of retired pay tentitled if retired under any provision of title 10 oth Income from all other sources not listed above. Do not include any benefits received under the Serecived as a victim of a war crime, a crime agair domestic terrorism; or compensation, pension, pathe United States Government in connection with injury or disability, or death of a member of the unlist other sources on a separate page and put the 	as stated in the next sentence innuity, or allowance paid by the sability, combat-related injury of services. If you received any include that pay only to the externormal which you would otherwise be than chapter 61 of that title. Specify the source and amour ocial Security Act; payments the humanity, or international or ay, annuity, or allowance paid by a disability, combat-related informed services. If necessary	ent ent e		
	Total amounts from congrete pages if any				
	Total amounts from separate pages, if any. 11. Calculate your total current monthly income. Accepted a column. Then add the total for Column A to	· · · · · · · · · · · · · · · · · · ·	\$0.00	+	= \$0.00 Total current monthly income
Pa	rt 2: Determine Whether the Means Test App	olies to You			
12.	Calculate your current monthly income for the year. Fe	follow these steps:			
	12a. Copy your total current monthly income from line	11		Copy line 11 here \rightarrow	\$0.00
	Multiply by 12 (the number of months in a year).				x 12
	12b. The result is your annual income for this part of th	ne form.		12b.	\$0.00
13.	Calculate the median family income that applies to yo	u. Follow these steps:			
	Fill in the state in which you live.	Texas			
	Fill in the number of people in your household.	1			
	Fill in the median family income for your state and size of To find a list of applicable median income amounts, go of instructions for this form. This list may also be available	online using the link specified i	n the separate	13.	\$55,591.00
14.	How do the lines compare?				
	14a. ☑ Line 12b is less than or equal to line 13. On the Go to Part 3. Do NOT fill out or file Official Form	n 122A-2.			
	14b. Line 12b is more than line 13. On the top of page	ge 1, check box 2, <i>The presum</i>	ption of abuse is determine	ed by Form 122A-2.	

Go to Part 3 and fill out Form 122A-2.

Debtor 1

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Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Maite Stella Casaldeiro

Signature of Debtor 1

Date 01/12/2023

MM/ DD/ YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

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IN THE UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF TEXAS SHERMAN DIVISION

IN RE: Ca	asaldeiro, Maite Stella	1	CASE NO
			CHAPTER 7
		VEF	RIFICATION OF CREDITOR MATRIX
The abo	ove named Debtor he	reby verifies that the att	ached list of creditors is true and correct to the best of his/her knowledge.
Date	01/12/2023	Signature	/s/ Maite Stella Casaldeiro Maite Stella Casaldeiro Debtor

Attorney General Child Support Attn: Bankruptcy PO Box 12017

Austin, TX 78711-2017

Cavalry Portfolio Services Attn: Bankruptcy Attn: Bankruptcy 500 Summit Lake Drive , Suite 400 Vahalla, NY 10595

Chase Card Services Attn: Bankruptcy P.O. 15298 Wilmington, DE 19850

Citibank Attn: Bankruptcy P.O. Box 790034 St Louis, MO 63179

Discover Financial Attn: Bankruptcy PO Box 3025 New Albany, OH 43054

Crystal Griffin 2601 NW Expressway Ste 205E Oklahoma City, OK 73112

Internal Revenue Service Centralized Insolvency Operations Po Box 7346 Philadelphia, PA 19101-7346

Midland Fund

Attn: Bankruptcy Attn: Bankruptcy 350 Camino De La Reine , Suite 100 San Diego, CA 92108

Nordstrom Signature Visa

Attn: Bankruptcy PO Box 6555 Englewood, CO 80155-6555

Office of the US Attorney

110 N. College Ave. Suite 700 Tyler, TX 75702-7237

Portfolio Recovery Associates,

LLC

Attn: Bankruptcy 120 Corporate

Boulevard

Norfolk, VA 23502

Portfolio Recovery Associates,

LLC

ATTN: Andrea D. Cudjoe-Jackson

120 Corporate Blvd. Norfolk, VA 23502

Rausch Sturm

ATTN: Colin Patrick Brogan 15660 N. Dallas Pkwy Ste 350

Dallas, TX 75248

Synchrony Bank/Banana Republic

Attn: Bankruptcy Dept PO Box 965060

Orlando, FL 32896-5060

Synchrony Bank/TJX

Attn: Bankruptcy Dept

PO Box 965064

Orlando, FL 32896-5060

Texas Comptroller of Public Accounts

Revenue Acct Div - BK Section

PO Box 13528

Austin, TX 78711-3528

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Texas Workforce Commission TEC Building - Bankruptcy 101 East 15th Street Austin, TX 78701-1442

The Bureaus Inc Attn: Bankruptcy Attn: Bankruptcy 650 Dundee Rd , Ste 370 Northbrook, IL 60062

United States Trustee's Office 110 N. College Ave. Ste 300 Tyler, TX 75702-7231